MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

- [AS FILED		1st AME	2nd	AFTER d AMENDMENT				*		•		·			
+	IND.	DEP.	IND.	DEP.	Z			EP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
T										51						
										52						
\perp					Ш					53			 			
										54			 	 	 	├
										55		<u> </u>		-	 	┼
					L					56			ļ	<u> </u>		
										57			ļ	ļ		┼
									l	58			ļ	 	├	
					<u> </u>		L_	<u> </u>	l	59	<u> </u>	 	 	 		+
					L	丄			!	60			<u> </u>			┼─┈
					_	1_	<u> </u>			61		 	├	 		┼
					_		_		ļ	62	 _	 		╁		┥
		<u> </u>			L		<u> </u>	1_	1	63	ļ	 		 		
				<u> </u>	1_		L	1_	1	64		 	 	₩	 	+
				ļ	1_		<u> </u>	1_	1	65		 	 	+	+	+
				<u> </u>	L	1	<u> </u>		1	66	 	├	 	-	╂	+-
\Box			ļ	ļ	┺	4	<u> </u>	1	4	67		 		 	┼	+
		<u></u>			 	\bot	 	1.	4	68		 	 	 	 	+-
		ļ	 	ļ	1	4	1	1	1	69		+	 		+	┪┈┈╴
		ļ			↓_	\downarrow	 	<u> </u>	4	70	├—	 	 	 		+
Ш					1		L		1	71	<u> </u>	 	 	-		
2		<u> </u>		<u> </u>	L		—	1	4	72	 	<u> </u>	 	+	┼─	+
3		<u> </u>		ļ	╄		ļ.		4	73			 		+	+
4		ļ	 _	ļ	1		↓_		4	74	┧	┼──		 	╁—	
5		ļ		ļ	1		╀-		4	75	 	 		-├	+	
6			1	ļ	┸		╄-		4	76	-	<u> </u>	 		╂─	
7		ļ	<u> </u>		4		╄	<u> </u>	4	77	 				+-	-
8				<u> </u>	1		-	Ì	4	78	 	-			╁	
9		<u> </u>	-	<u> </u>	4-		+	ᆜ	4	79				+	+	_
0		 	 	 	4		+		-	80	╂	+	+		+	
1			<u> </u>		╀		+-		-{	81				┧	-	_
2			-	+	╂		+		-	82		+	1		1-	1
3							+		-	84		- 	-	+	_	
4			 		╁		+		┨	85			 		+-	
5				┪	╌		+-		┪	86	+		1			•
6				+	+		+		\dashv	87	+	+-	1-	\top	1	
7	 	+	+	 	+		+		-	88	+	+	1	1	1	\neg
8				 	+		+		-	89	+		+	1		\neg
9	 				+		+		4	90	+-		1-		_	
0	 	+	+-	+	十		+		┨	91	1		1		1	
1	 	+-	+	+	+		+		┪	92			1	1		
2	 	-			十		+		7	93	1	1				
13	 			+-	+		+		┪	94	\top	1	1			
14 15	 			+-	十		+		\dashv	95		$\neg \neg$	 			
	├	÷	-		+		+		┨	96	+	_	1			
16	 	+	+		+		+		-	97	_	1	_			
17 18	 		+	+	+		+		7	98	1		1		T	
19	├	+		+	+		+		-	99						
50	\vdash	+		-	+		十		1	100		1	1			
	 	+-		+	╅	2	\dashv		ヿ	TOTAL		-				
)	1	 ↓			L		لہ		-		. 	┸╻┪	-	لــ ـــ	-	
TAL P.	l	لبب				17	_ '	_		DEP.						Taxas
TAL		7.5	18	100	33	In	1	7		TOTA	L AS					
TAL P.				J	1 -1		3 19	+ TT	4 19 4	4 14 4	TOTA DEP.	TOTAL DEP.	TOTAL DEP.	TOTAL DEP.	IND. TOTAL DEP. TOTAL CLAIMS	IND. TOTAL DEP.